

Check A Box  
Patented Specimens

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S):	
10/030699	

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	1		1			
TOTAL DEP.	22		19			
TOTAL CLAIMS	23		20			

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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